

**TECHNICAL FIRE MANAGEMENT**  
APPLICATION STATEMENT, APPROVAL, AND RECOMMENDATIONS

**STUDENT:** Discuss why you wish to attend Technical Fire Management (TFM), include how this program will help you achieve your short- and long-term career goals.

**IMMEDIATE SUPERVISOR RECOMMENDATION:** I approve candidate's attendance to TFM and will ensure necessary support is available to the student to successfully complete this program. I understand the time commitment for completion of the final project is estimated at 250-500 hours and have discussed appropriate duty time allocations with this candidate.

Comments:

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Signature – Immediate Supervisor

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Date

**DISTRICT FIRE MANAGEMENT OFFICER RECOMMENDATION:** I approve candidate's attendance to TFM and will ensure necessary support is available to the student to successfully complete this program. I understand the time commitment for completion of the final project is estimated at 250-500 hours and have discussed appropriate duty time allocations with this candidate. Coordination has occurred between the District and State Office Fire Management staff regarding the appropriateness of this candidate and funding availability.

Comments:

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Signature – District Fire Management Officer

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Date

**DISTRICT/ FIELD OFFICE MANAGER:** I approve candidate's attendance to TFM and will ensure necessary support is available to the student to successfully complete this program. Coordination has occurred between the District and State Office Fire Management staff regarding the appropriateness of this candidate and funding availability.

Comments:

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Signature – District/Field office manager

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Date